

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	<i>[Signature]</i>		<i>02/14/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		<i>13</i>	<i>3-1-00</i>
FORMALITY REVIEW	<i>21113</i>	<i>70976</i>	<i>4-14-00</i>
RESPONSE FORMALITY REVIEW	<i>21113</i>	<i>70976</i>	<i>6-5-00</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 - ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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